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| Fill in this information to identify your case: | | |
|---|-------------------------------|-----------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS | _ | |
| Case number (if known) | Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | ☐ Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | t 1: Identify Yourself | | |
|-----|--|---|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | |
| | Write the name that is on your government-issued picture identification (for example, your driver's | Susan First name J. | First name |
| | license or passport). | Middle name | Middle name |
| | Bring your picture identification to your meeting with the trustee. | Calandra Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) |
| | | | |
| 2. | All other names you have used in the last 8 years | | |
| | Include your married or maiden names. | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-5938 | |
| | | | |

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Case number (if known)

Debtor 1 Susan J. Calandra

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|----|---|---|---|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | ■ I have not used any business name or EINs. Business name(s) | ☐ I have not used any business name or EINs. Business name(s) |
| | | EINs | EINs |
| 5. | Where you live | 590 Westminster Circle Roselle, IL 60172 | If Debtor 2 lives at a different address: |
| | | Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code |
| | | DuPage County | County |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code |
| 6. | Why you are choosing this district to file for bankruptcy | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) |
| | | | |

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Case number (if known) Debtor 1 Susan J. Calandra

| ar | t 2: Tell the Court About | our Ba | ınkruptcy Ca | se | | | |
|-----|---|--------|----------------------------------|---|---|---|------|
| 7. | The chapter of the Bankruptcy Code you are | | | | of each, see <i>Notice Required by</i> page 1 and check the appropriat | 11 U.S.C. § 342(b) for Individuals Filing for Bankrupto e box. | У |
| | choosing to file under | ■ Ch | apter 7 | | | | |
| | | ☐ Ch | apter 11 | | | | |
| | | | apter 12 | | | | |
| | | | apter 13 | | | | |
| | | | | | | | |
| 3. | How you will pay the fee | - | about how yo | u may pay. Typi attorney is subm | cally, if you are paying the fee yo | k with the clerk's office in your local court for more defurself, you may pay with cash, cashier's check, or moalf, your attorney may pay with a credit card or check | ney |
| | | | | | allments. If you choose this option (Official Form 103A). | n, sign and attach the Application for Individuals to Po | ay |
| | | | but is not req applies to you | uired to, waive y ur family size and | our fee, and may do so only if yo d you are unable to pay the fee ir | n only if you are filing for Chapter 7. By law, a judge m ur income is less than 150% of the official poverty line installments). If you chose this option, you must fill | that |
| | | 1 | the <i>Applicatio</i> | n to Have the C | napter / Filing Fee Waived (Offic | ial Form 103B) and file it with your petition. | |
| Э. | Have you filed for bankruptcy within the last 8 years? | ■ No. | | | | | |
| | nacio youro. | □ 163 | District | | When | Case number | |
| | | | District | | When | Case number | |
| | | | District | | When | Case number | |
| | | | | | | | |
| 10. | Are any bankruptcy cases pending or being | ■ No | | | | | |
| | filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ☐ Yes | 3. | | | | |
| | | | Debtor | - | | Relationship to you | |
| | | | District | | When | Case number, if known | |
| | | | Debtor | | | Relationship to you | |
| | | | District | | When | Case number, if known | |
| 11. | Do you rent your | ■ No. | Go to I | ine 12. | | | |
| | residence? | | | | ned an eviction judament agains | t you and do you want to stay in your residence? | |
| | | ☐ Yes | _ | No. Go to line 1 | | t you and do you want to stay in your residence? | |
| | | | | | | ludament Against Vall/Form 404A) and file it with this | • |
| | | | | bankruptcy peti | | <i>ludgment Against You</i> (Form 101A) and file it with this | 5 |

| | | Document | Page 4 01 49 | |
|----------|-------------------|----------|------------------------|--|
| Debtor 1 | Susan J. Calandra | | Case number (if known) | |

| art | 3: Report About Any Bu | sinesses | You Owr | as a Sole Proprieto | or |
|-----|---|---------------|---|--|---|
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to | Part 4. | |
| | | ☐ Yes. | Name | and location of busing | ness |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name | e of business, if any | |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | Numb | oer, Street, City, State | e & ZIP Code |
| | it to this petition. | | Chec | k the appropriate box | to describe your business: |
| | | | | Health Care Busine | ess (as defined in 11 U.S.C. § 101(27A)) |
| | | | | Single Asset Real I | Estate (as defined in 11 U.S.C. § 101(51B)) |
| | | | | Stockbroker (as de | fined in 11 U.S.C. § 101(53A)) |
| | | | | Commodity Broker | (as defined in 11 U.S.C. § 101(6)) |
| | | | | None of the above | |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | deadlines | s. If you ir is, cash-f s.C. 1116 | ndicate that you are a low statement, and fe (1)(B). | ourt must know whether you are a small business debtor so that it can set appropriate small business debtor, you must attach your most recent balance sheet, statement of deral income tax return or if any of these documents do not exist, follow the procedure |
| | For a definition of small | No. | I am ı | not filing under Chapt | er 11. |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am f Code | • | 1, but I am NOT a small business debtor according to the definition in the Bankruptcy |
| | | ☐ Yes. | I am f | iling under Chapter 1 | 1 and I am a small business debtor according to the definition in the Bankruptcy Code. |
| art | 4: Report if You Own or | Have Any | / Hazardo | ous Property or Any | Property That Needs Immediate Attention |
| 14. | Do you own or have any | ■ No. | | | |
| | property that poses or is alleged to pose a threat of imminent and | ■ No. ☐ Yes. | What is | the hazard? | |
| | identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? | | | diate attention is why is it needed? | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where is | s the property? | Number Circus City Class 8 7 to Oads |
| | | | | | Number, Street, City, State & Zip Code |

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Debtor 1 Susan J. Calandra

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 49 Case number (if known) Debtor 1 Susan J. Calandra Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? **\$100,001 - \$500,000** □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,000,001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Susan J. Calandra Signature of Debtor 2 Susan J. Calandra Signature of Debtor 1

Executed on

MM / DD / YYYY

Executed on April 5, 2016

MM / DD / YYYY

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Debtor 1 Susan J. Calandra Document Page 7 of 49 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Gregory J. Martucci | Date | April 5, 2016 |
|---|---------------|----------------------|
| Signature of Attorney for Debtor | | MM / DD / YYYY |
| Gregory J. Martucci Printed name | | |
| Law Office of Gregory J. Martucci, P.C. | | |
| 203 E. Irving Park Rd. Roselle, IL 60172 | | |
| Number, Street, City, State & ZIP Code | | |
| Contact phone (630) 980-8333 | Email address | greg@martuccilaw.com |
| 6185842 | | |
| Bar number & State | | |

| | | DOCUM | <u>-111 Page 8 01 49</u> | |
|---------------------|--------------------------|-------------------|--------------------------|--------------------------------------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Susan J. Calandr | a | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is an amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Par | 1: Summarize Your Assets | | |
|-----|---|--------------|--------------------------|
| | | Your a | ssets of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 141,000.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 6,158.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 147,158.00 |
| Par | 2: Summarize Your Liabilities | | |
| | | | abilities t you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 131,324.04 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 39,442.00 |
| | Your total liabilities | \$ | 170,766.04 |
| Par | 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 2,880.08 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 2,841.74 |
| Par | 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ur other scl | hedules. |
| 7. | Yes What kind of debt do you have? | | |
| | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. | a personal | , family, or |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

Debtor 1 Susan J. Calandra Document Page 9 of 49
Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____1,267.17

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total claim | |
|--|-------------|------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

| | Cas | se 16-11759 | Doc 1 | | 04/06/16 ument | Entered 04/06/1 Page 10 of 49 | 6 10:46:43 | Des | c Main |
|---|--|--|--|--------------------------|------------------------------------|--|--------------------|-------------|--|
| Fill in thi | is informa | ation to identify | your case and th | | | 1 / M.M. 1 (/ (/ / - 4 . / | | | |
| Debtor 1 | | Susan J. Cal | andra | | | | | | |
| | | First Name | | e Name | | Last Name | | | |
| Debtor 2 (Spouse, if fi | iling) | First Name | Middle | e Name | | Last Name | | | |
| | • | kruptcy Court for | the: NORTHER | RN DISTI | RICT OF ILLIN | NOIS | | | |
| _ | | , , | | | | | | _ | |
| Case nun | mber | | | | | _ | | [| Check if this is a amended filing |
| Sche | dule | m 106A/B | operty | | | | | | 12/15 |
| nink it fits nformation nswer eve | best. Be a n. If more s ery question | as complete and a space is needed, a on. | ccurate as possib attach a separate s | le. If two heet to th | married people nis form. On the | an asset fits in more than one e are filing together, both are e top of any additional pages, vn or Have an Interest In | equally responsi | ble for sup | plying correct |
| | | • | | | | | | | |
| _ ` | | | uitable interest in a | any resid | ence, building, | land, or similar property? | | | |
| | Go to Part 2 | | | | | | | | |
| Yes. | Where is t | he property? | | | | | | | |
| | | | | | | | | | |
| | | | | 140 - 4 | | 0 | | | |
| 1.1 590 |) Westmi | inster Circle | | _ | | /? Check all that apply | | | |
| | | available, or other des | cription | | Single-family h | | | | ns or exemptions. Put claims on <i>Schedule D:</i> |
| | | | | _ | · | or cooperative | Creditors Who F | lave Claims | Secured by Property. |
| | | | | | 0011001111110111 | o. cooperative | | | |
| | | | | | Manufactured | or mobile home | Current value of | of the | Current value of the |
| Ros | selle | IL | 60172-0000 | | Land | | entire property | | portion you own? |
| City | | State | ZIP Code | | Investment pro | operty | \$141,0 | 00.00 | \$141,000.0 |
| | | | | | Timeshare Other | | | | ur ownership interest |
| | | | | _ | | in the property? Check one | a life estate), if | | ncy by the entireties, c |
| | | | | | Debtor 1 only | and property . Oneok one | | | |
| DuF | Page | | | | Debtor 2 only | | | | |
| Count | ity | | | | Debtor 1 and [| Debtor 2 only | — Chaol: if th | .i. i | |
| | | | | | At least one of | f the debtors and another | (see instruction | | nunity property |
| | | | | | information your | ou wish to add about this iten on number: | n, such as local | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| Add t | the dollar | value of the po | rtion you own fo | or all of v | our entries f | rom Part 1, including any | entries for | | |

pages you have attached for Part 1. Write that number here.....

\$141,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Case 16-11759 Doc 1 Filed 04/06/16 Entered 04/06/16 10:46:43 Desc Main Document Page 11 of 49 Case number (if known) Debtor 1 Susan J. Calandra 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Suzuki Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: **Grand Vitara** Creditors Who Have Claims Secured by Property. Model: ■ Debtor 1 only 2006 Year: Debtor 2 only Current value of the Current value of the Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another \$3,500.00 \$3,500.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$3.500.00 pages you have attached for Part 2. Write that number here..... Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... **Used Furniture** \$1,000.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... Computer \$100.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment

Nο

| | Case 16-117 | 59 Doc 1 | Filed 04/06/16 Document | Entered 04/06/16 10:46:43 | Desc Main |
|------------------------------------|---|---------------------|--|---|--|
| Debtor 1 | Susan J. Calandr | a | Document | Page 12 of 49 Case number (if know | n) |
| ☐ Yes. | Describe | | | | |
| 11. Clothe | | fure leather coat | s, designer wear, shoes | accessories | |
| | oles. Everyday clothes, | iuis, icaliici coal | s, designer wear, snoes | , 40003301103 | |
| Yes. | Describe | | | | |
| | Use | ed Clothing | | | \$100.00 |
| □ No | | costume jewelry, | engagement rings, wed | ding rings, heirloom jewelry, watches, gems | i, gold, silver |
| | Cos | stume Jewelry | | | \$50.00 |
| Examp ■ No □ Yes. 14. Any ot □ No | rm animals bles: Dogs, cats, birds, Describe her personal and hou | ısehold items yo | u did not already list, i | ncluding any health aids you did not list | |
| | | | 2D DVD- | | ¢50.00 |
| | Boo | oks, Pictures, (| ODS + DADS | | \$50.00 |
| | | | rom Part 3, including a | ny entries for pages you have attached | \$1,300.00 |
| | scribe Your Financial As | | | | |
| Do you ov | vn or have any legal o | or equitable inter | est in any of the follow | ring? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| □ No . | , , | | our home, in a safe depo | osit box, and on hand when you file your pe | tition |
| | | | | Cash | \$3.00 |
| Examp | institutions. If you | | al accounts; certificates of counts with the same ins Institution r Chase Ba Blooming #0897 | name: | e houses, and other similar |
| | | | Chase Ba | | |
| | 17 | .2. Checking | Blooming #8194 | gdale, IL | \$54.00 |

Official Form 106A/B Schedule A/B: Property

| | | Case 16-117 | 759 Do | c 1 | Filed 04/06/16 Document | Entered 04/ | 706/16 10:46:43 9 Case number (if known) | Desc Main |
|------------------------|----------------------------|---|--------------------------------|----------------------------|---|---|--|-------------------------------|
| Deb | tor 1 | Susan J. Caland | dra | | 2004 | | Case number (if known) | |
| | | 1 | 7.3. Chec | king | | ank gdale, IL h Daughter - Laur ever made any de | en Calandra | \$785.00 |
| | | 1 | 7.4. Chec | king | | gdale, IL h Son - Thomas C ever made any de | | \$500.00 |
| ■ □ 19. ! | Examp No Yes Non-pu | blicly traded stock | estment acco | ounts wi | ith brokerage firms, mon | | | t in an LLC, partnership, and |
| | joint ve I No I Yes. | Give specific inform | ation about th Name of er | | | | % of ownership: | |
| | Negotia Non-ne ■ No | able instruments incl | ude personal s are those yo | l checks ou cann iem | negotiable and non-n s, cashiers' checks, pro not transfer to someone | missory notes, and n | noney orders. | |
| | | nent or pension accordes: Interests in IRA, | | gh, 401 | (k), 403(b), thrift saving | gs accounts, or other | pension or profit-sharing | plans |
| _ | | List each account se | parately. Type of accou | unt: | Institution r | name: | | |
| _ | Your sh | | posits you h | | de so that you may con rent, public utilities (ele | | from a company ecommunications compan | ies, or others |
| _ | _ | | | | Institution r | name or individual: | | |
| | Annuiti I No | es (A contract for a | periodic payr | ment of | money to you, either fo | r life or for a number | of years) | |
| | Yes | lssuer | name and d | escripti | on. | | | |
| 2 | 6 U.S.C | s in an education II C. §§ 530(b)(1), 529/ | | | n a qualified ABLE pro | ogram, or under a q | ualified state tuition pro | gram. |
| | ■ No I Yes | Institu | tion name ar | nd desc | ription. Separately file t | he records of any inte | erests.11 U.S.C. § 521(c): | |
| | Γrusts, ■ _{No} | equitable or future | interests in | prope | rty (other than anythir | ng listed in line 1), a | and rights or powers exe | rcisable for your benefit |
| _ | _ | Give specific inform | ation about th | hem | | | | |
| | | | | | ts, and other intellector roceeds from royalties a | | nents | |

 $\hfill \square$ Yes. Give specific information about them...

| D | ebtor 1 | Susan J. Calandra | Document | Page 14 of 49 Case number (if known) | |
|-----|------------------|--|---|--|--|
| 27. | Example ■ No | es, franchises, and other general intan les: Building permits, exclusive licenses, Give specific information about them | | n holdings, liquor licenses, professional licens | ees |
| | — 100. | ove specific information about them | | | |
| M | oney or p | roperty owed to you? | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax refu ■ No | ınds owed to you | | | |
| | ☐ Yes. 0 | Sive specific information about them, incl | luding whether you alre | ady filed the returns and the tax years | |
| 29. | ■ No | | sal support, child supp | ort, maintenance, divorce settlement, property | settlement |
| 30. | | mounts someone owes you les: Unpaid wages, disability insurance p benefits; unpaid loans you made to s | ayments, disability ben someone else | efits, sick pay, vacation pay, workers' compe | nsation, Social Security |
| | ☐ Yes. | Give specific information | | | |
| 31. | | s in insurance policies les: Health, disability, or life insurance; h | ealth savings account (| HSA); credit, homeowner's, or renter's insura | nce |
| | ☐ Yes. N | lame the insurance company of each po Company name: | licy and list its value. | Beneficiary: | Surrender or refund value: |
| 32. | If you a | erest in property that is due you from re the beneficiary of a living trust, expect he has died. | | ed surance policy, or are currently entitled to rec | eive property because |
| | ■ No | | | | |
| | ☐ Yes. | Give specific information | | | |
| 33. | | against third parties, whether or not y les: Accidents, employment disputes, ins | | | |
| | | Describe each claim | | | |
| 34. | Other c | ontingent and unliquidated claims of | every nature, includin | g counterclaims of the debtor and rights to | set off claims |
| | | Describe each claim | | | |
| 35. | Any fina | ancial assets you did not already list | | | |
| | | Give specific information | | | |
| 36 | | ne dollar value of all of your entries from the control of the con | | ny entries for pages you have attached | \$1,358.00 |
| Pa | rt 5: Des | cribe Any Business-Related Property You | Own or Have an Interest | In. List any real estate in Part 1. | |
| 37 | Do vou o | wn or have any legal or equitable interest i | n any business-related n | roperty? | |
| | No. Go | · · | , 220300 rolatou p | | |
| | Yes. G | to line 38. | | | |

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Case number (if known) Document Debtor 1 Susan J. Calandra Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$141,000.00 Part 2: Total vehicles, line 5 \$3.500.00 57. Part 3: Total personal and household items, line 15 \$1,300.00 Part 4: Total financial assets, line 36 \$1,358.00 Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 60. Part 7: Total other property not listed, line 54 \$0.00 61. Total personal property. Add lines 56 through 61... \$6,158.00 Copy personal property total \$6,158.00

Official Form 106A/B Schedule A/B: Property page 6

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$147,158.00

| | | | .m | 3 |
|---------------------|--------------------------|-------------------|-------------|---|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Susan J. Calandr | a | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | |
| | | | | |
| | | | | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amo | ount of the exemption you claim | Specific laws that allow exemption |
|--|--------------------------------------|-----|---|------------------------------------|
| | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| 590 Westminster Circle Roselle, IL 60172 DuPage County | \$141,000.00 | | \$8,813.00 | 735 ILCS 5/12-901 |
| Line from Schedule A/B: 1.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| 2006 Suzuki Grand Vitara Line from Schedule A/B: 3.1 | \$3,500.00 | | \$2,400.00 | 735 ILCS 5/12-1001(c) |
| Line Holli Schedule AVB. 3.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| 2006 Suzuki Grand Vitara Line from Schedule A/B: 3.1 | \$3,500.00 | | \$1,100.00 | 735 ILCS 5/12-1001(b) |
| Ellie IIolii ochedale A.B. G.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| Used Furniture Line from Schedule A/B: 6.1 | \$1,000.00 | | \$1,000.00 | 735 ILCS 5/12-1001(b) |
| Ellie IIolii ochedale A.B. G.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| Used Clothing Line from Schedule A/B: 11.1 | \$100.00 | | \$100.00 | 735 ILCS 5/12-1001(a) |
| Line nom <i>Schedule AVD</i> . 11:1 | | | 100% of fair market value, up to any applicable statutory limit | |

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| Debto | or 1 Susan J. Calandra | | | | Case number (if known) | |
|------------------|--|--------------------------------------|--------|-------------|--|------------------------------------|
| | trief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | | | exemption you claim | Specific laws that allow exemption |
| | | Copy the value from Schedule A/B | Cne | ck only one | box for each exemption. | |
| | Costume Jewelry ine from Schedule A/B: 12.1 | \$50.00 | | | \$50.00 | 735 ILCS 5/12-1001(b) |
| | | | | | fair market value, up to cable statutory limit | |
| | Books, Pictures, CDs + DVDs ine from Schedule A/B: 14.1 | \$50.00 | | | \$50.00 | 735 ILCS 5/12-1001(b) |
| | | | | | fair market value, up to cable statutory limit | |
| | Cash ine from Schedule A/B: 16.1 | \$3.00 | | | \$3.00 | 735 ILCS 5/12-1001(b) |
| | | | | | fair market value, up to cable statutory limit | |
| | Checking: Chase Bank Bloomingdale, IL | \$16.00 | | | \$16.00 | 735 ILCS 5/12-1001(b) |
| # | 10897 ine from Schedule A/B: 17.1 | | | | fair market value, up to cable statutory limit | |
| | Checking: Chase Bank Bloomingdale, IL | \$54.00 | | | \$54.00 | 735 ILCS 5/12-1001(b) |
| # | ine from Schedule A/B: 17.2 | | | | fair market value, up to cable statutory limit | |
| | Checking: Chase Bank | \$785.00 | | | \$785.00 | 735 ILCS 5/12-1001(b) |
| | Bloomingdale, IL 4372 | | | 100% of | fair market value, up to | |
| J | loint with Daughter - Lauren Calandra | | | | cable statutory limit | |
| ٧ | Debtor never made any deposits or vithdrawals ine from Schedule A/B: 17.3 | | | | | |
| | Checking: Chase Bank Bloomingdale, IL | \$500.00 | | | \$500.00 | 735 ILCS 5/12-1001(b) |
| # J E V | 16557 Hoint with Son - Thomas Calandra Debtor never made any deposits or vithdrawals ine from Schedule A/B: 17.4 | | | | fair market value, up to cable statutory limit | |
| | Are you claiming a homestead exemption of Subject to adjustment on 4/01/19 and every 3 | | | led on or a | fter the date of adjustmen | t.) |
| | Yes. Did you acquire the property covered No | ed by the exemption wi | thin 1 | ,215 days | before you filed this case? | |
| | Π Yes | | | | | |

| | Document Pag | e 18 of 49 | | |
|--|--|---|--|-------------------|
| Fill in this information to identify you | ur case: | | | |
| Debtor 1 Susan J. Caland | dra | | | |
| First Name | Middle Name Last N | ame | - | |
| Debtor 2 | | | | |
| (Spouse if, filing) First Name | Middle Name Last N | ame | _ | |
| United States Bankruptcy Court for the | : NORTHERN DISTRICT OF ILLINOIS | | | |
| ormod Glatos Barmapio, Godit for the | | | _ | |
| Case number | | | | |
| (if known) | | | ☐ Check | if this is an |
| | | | ameno | led filing |
| O#:-:-! F 400D | | | | |
| Official Form 106D | | | | |
| Schedule D: Creditors | s Who Have Claims Sec | ured by Propert | ty | 12/15 |
| | | | | |
| | If two married people are filing together, both out, number the entries, and attach it to this f | | | |
| number (if known). | , | | | |
| 1. Do any creditors have claims secured b | y your property? | | | |
| ☐ No. Check this box and submit t | his form to the court with your other schedu | les. You have nothing else | to report on this form. | |
| ■ Yes. Fill in all of the information | helow | • | · | |
| | below. | | | |
| Part 1: List All Secured Claims | | . Column A | Column B | Column C |
| | more than one secured claim, list the creditor ser | arately | | |
| much as possible, list the claims in alphabet | s a particular claim, list the other creditors in Part ical order according to the creditor's name. | 2. As Amount of claim Do not deduct the | Value of collateral that supports this | Unsecured portion |
| | , and the second | value of collateral. | claim | if any |
| 2.1 Best Buy | Describe the property that secures the clair | n: \$697.00 | \$100.00 | \$597.00 |
| Creditor's Name | Computer | | | |
| | | | | |
| P.O. Box 688911 | As of the date you file, the claim is: Check all | that | | |
| Des Moines, IA 50368 | apply. | | | |
| Number, Street, City, State & Zip Code | Contingent | | | |
| Number, Street, City, State & Zip Code | Unliquidated | | | |
| Who owes the debt? Check one. | ☐ Disputed Nature of lien. Check all that apply. | | | |
| _ | _ | | | |
| Debtor 1 only | An agreement you made (such as mortgag car loan) | e or secured | | |
| Debtor 2 only | | U \ | | |
| ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | ☐ Statutory lien (such as tax lien, mechanic's ☐ Judgment lien from a lawsuit | lien) | | |
| ☐ Check if this claim relates to a | Other (including a right to offset) | | | |
| community debt | Uncluding a right to onset) | | | |
| • | | | | |
| Date debt was incurred | Last 4 digits of account number | <u> </u> | | |
| | | | | |
| 2.2 Cenlar | Describe the property that secures the clair | | \$141,000.00 | \$0.00 |
| Creditor's Name | 590 Westminster Circle Roselle, IL | | | |
| | 60172 DuPage County | | | |
| P.O. Box 77404 | As of the date you file, the claim is: Check all | that | | |
| Ewing, NJ 08628 | apply. | | | |
| | Contingent | | | |
| Number, Street, City, State & Zip Code | Unliquidated | | | |
| Who owes the debt? Check one. | ☐ Disputed Nature of lien. Check all that apply. | | | |
| _ | ☐ An agreement you made (such as mortgage | or secured | | |
| Debtor 1 only | car loan) | e or secured | | |
| Debtor 2 only | <u> </u> | P \ | | |
| Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mechanic's | iien) | | |
| At least one of the debtors and another | Judgment lien from a lawsuit | 1200 | | |
| ☐ Check if this claim relates to a community debt | Other (including a right to offset) | Jaye . | | |
| | | | | |
| Date debt was incurred | Last A digits of account number | 3462 | | |

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| Debtor 1 Susan J. Calandra | | Case r | number (if know) | | |
|--|---|---------------------|------------------|--------------|--------|
| First Name Middle N | lame Last Name | | | | |
| 2.3 Waterberry Village | Describe the property that secures | the claim: | \$198.00 | \$141,000.00 | \$0.00 |
| Creditor's Name | 590 Westminster Circle Ros 60172 DuPage County | selle, IL | | | |
| P.O. Box 5604 Carol Stream, IL 60197 | As of the date you file, the claim is: apply. Contingent | Check all that | | | |
| Number, Street, City, State & Zip Code | ☐ Unliquidated☐ Disputed | | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | | |
| ■ Debtor 1 only □ Debtor 2 only | ☐ An agreement you made (such as car loan) | mortgage or secured | | | |
| Debtor 1 and Debtor 2 only | Statutory lien (such as tax lien, me | echanic's lien) | | | |
| ☐ At least one of the debtors and another | ☐ Judgment lien from a lawsuit | | | | |
| ☐ Check if this claim relates to a community debt | Other (including a right to offset) | Association Due | 9 S | | |
| Date debt was incurred | Last 4 digits of account num | ber | | | |
| | | | | | |
| Add the dollar value of your entries in C | Column A on this page. Write that num | nber here: | \$131,324. | .04 | |
| If this is the last page of your form, add Write that number here: | the dollar value totals from all pages | | \$131,324. | .04 | |

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

| | Case 10 11/00 E | Document | Page 20 | nd 04/00/10 10:40:4 nf 49 | PC30 Main |
|--------------------------|---|--|--------------------|---------------------------------------|---|
| Fill in th | nis information to identify your o | | | | |
| Debtor 1 | Susan J. Calandra | 1 | | | |
| 200.0. | First Name | Middle Name | Last Name | | |
| Debtor 2 | | Middle Name | Last Name | | |
| (Spouse if, | ming) First Name | | | | |
| United S | States Bankruptcy Court for the: | NORTHERN DISTRICT OF IL | LINOIS | | |
| Case nu | mber | | | | |
| (if known) | | | | | ☐ Check if this is an |
| | | | | | amended filing |
| Officia | I Form 106E/F | | | | |
| | dule E/F: Creditors W | ho Have Unsecured | Claims | | 12/15 |
| | | | | Part 2 for creditors with NONP | RIORITY claims. List the other party to |
| Schedule left. Attacl | | ured by Property. If more space is | needed, copy t | the Part you need, fill it out, nu | cured claims that are listed in umber the entries in the boxes on the o of any additional pages, write your |
| Part 1: | List All of Your PRIORITY Un | secured Claims | | | |
| 1. Do a | ny creditors have priority unsecured | d claims against you? | | | |
| ■ N | o. Go to Part 2. | | | | |
| □ Y | es. | | | | |
| Part 2: | List All of Your NONPRIORIT | | | | |
| 3. Do a | ny creditors have nonpriority unsec | ured claims against you? | | | |
| ПΝ | o. You have nothing to report in this pa | art. Submit this form to the court with | your other sche | edules. | |
| ■ Y | es. | | | | |
| unse | all of your nonpriority unsecured cla cured claim, list the creditor separately one creditor holds a particular claim, li 2. | for each claim. For each claim listed | d, identify what t | ype of claim it is. Do not list clair | ms already included in Part 1. If more |
| | | | | | Total claim |
| | Capital One Bank | Last 4 digits of acc | ount number | 7131 | \$3,772.00 |
| | Nonpriority Creditor's Name | When was the deb | t incurred? | | |
| | P.O. Box 30281 Salt Lake City, UT 84130 | When was the deb | incurreur | | |
| ī | Number Street City State Zlp Code | As of the date you | file, the claim i | s: Check all that apply | |
| | Who incurred the debt? Check one. | | | | |
| | Debtor 1 only | ☐ Contingent | | | |
| l | Debtor 2 only | ☐ Unliquidated | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | At least one of the debtors and and | □ a | RITY unsecured | I claim: | |
| | ☐ Check if this claim is for a comm | • | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising report as priority claim | | ration agreement or divorce that | t you did not |
| | ■ No | | | g plans, and other similar debts | |
| | □ Yes | Other. Specify | | | |
| | - - | - Other. Specify | | | |

Document Page 21 of 49 Debtor 1 Susan J. Calandra Case number (if know) 4.2 \$3,474.00 **Care Credit** Last 4 digits of account number 7388 Nonpriority Creditor's Name P.O. Box 965036 When was the debt incurred? Orlando, FL 32896 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card Purchases ☐ Yes 4.3 **Chase Bank** Last 4 digits of account number 7861 \$9,653.00 Nonpriority Creditor's Name P.O. Box 15298 When was the debt incurred? Wilmington, DE 19850 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No **Credit Card Purchases** ☐ Yes Other. Specify 4.4 **Chase Bank** Last 4 digits of account number 8360 \$6,545.00 Nonpriority Creditor's Name P.O. Box 15298 When was the debt incurred? Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated

Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes

Page 22 of 49 Document Debtor 1 Susan J. Calandra Case number (if know) 4.5 \$9,673.00 **Chase Bank** Last 4 digits of account number 4688 Nonpriority Creditor's Name P.O. Box 15298 When was the debt incurred? Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card Purchases ☐ Yes 4.6 **Comenity Bank - Avenue** Last 4 digits of account number 5229 \$247.00 Nonpriority Creditor's Name P.O. Box 659584 When was the debt incurred? San Antonio, TX 78265 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No **Credit Card Purchases** ☐ Yes Other, Specify 4.7 **EIS** Last 4 digits of account number \$0.00 Nonpriority Creditor's Name P.O. Box 1730 When was the debt incurred? Renoldsburg, OH 43062 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another

■ No

☐ Yes

☐ Student loans

report as priority claims

 \square Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Collector for Best Buy

☐ Check if this claim is for a community

Is the claim subject to offset?

Page 23 of 49 Document Debtor 1 Susan J. Calandra Case number (if know) 4.8 \$235.00 **JCPenneys** Last 4 digits of account number 3701 Nonpriority Creditor's Name P.O. Box 45270 When was the debt incurred? Salt Lake City, UT 84145 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card Purchases ☐ Yes 4.9 Northland Group, Inc. Last 4 digits of account number \$0.00 Nonpriority Creditor's Name P.O. Box 390846 When was the debt incurred? Minneapolis, MN 55439 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Collector for Sears 4.1 Sears 9252 \$735.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 818017 When was the debt incurred? Cleveland, OH 44181 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another

debt

■ No

☐ Yes

☐ Student loans

report as priority claims

 $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Credit Card Purchases

☐ Check if this claim is for a community

Is the claim subject to offset?

| | Case 10-11/39 | DOC I | FIIEU 04/00/10 | EIIIGIGU 04/00/10 10.40.40 | 5 Dest Mail |
|----------|-------------------|-------|----------------|-------------------------------------|-------------|
| Debtor 1 | Susan J. Calandra | | Document | Page 24 of 49 Case number (if know) | |
| | | | | | |

| \$936.00 | Last 4 digits of account number | State Collection Service, Inc. |
|------------|--|--|
| | When was the debt incurred? | Nonpriority Creditor's Name 2509 S. Stoughton Road Madison, WI 53716 |
| | As of the date you file, the claim is: Check all that apply | Number Street City State Zlp Code |
| | | Who incurred the debt? Check one. |
| | ☐ Contingent | Debtor 1 only |
| | ☐ Unliquidated | Debtor 2 only |
| | ☐ Disputed | ☐ Debtor 1 and Debtor 2 only |
| | Type of NONPRIORITY unsecured claim: | ☐ At least one of the debtors and another |
| | ☐ Student loans | ☐ Check if this claim is for a community |
| | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | debt Is the claim subject to offset? |
| | ☐ Debts to pension or profit-sharing plans, and other similar debts | ■ No |
| | ■ Other. Specify Collector for Northwestern Medicine | Yes |
| \$4,172.00 | Last 4 digits of account number 0438 | US Bank |
| | When was the debt incurred? | Nonpriority Creditor's Name P.O. Box 790401 Saint Louis, MO 63179 |
| | As of the date you file, the claim is: Check all that apply | Number Street City State Zlp Code Who incurred the debt? Check one. |
| | ☐ Contingent | Debtor 1 only |
| | ☐ Unliquidated | Debtor 2 only |
| | □ Disputed | ☐ Debtor 1 and Debtor 2 only |
| | Type of NONPRIORITY unsecured claim: | ☐ At least one of the debtors and another |
| | ☐ Student loans | ☐ Check if this claim is for a community |
| | _ | debt |
| | Dobligations arising out of a separation agreement or divorce that you did not report as priority claims | Is the claim subject to offset? |
| | | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Total Claim |
|-----------------------|-----|---|-----|------------------------|
| | 6a. | Domestic support obligations | 6a. | \$ 0.00 |
| Total claims | | | | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ 0.00 |
| Total | 6f. | Student loans | 6f. | \$ Total Claim 0.00 |
| claims from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ 0.00 |

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Page 25 of 49 Case number (if know) Debtor 1 Susan J. Calandra

> Other. Add all other nonpriority unsecured claims. Write that amount 6i. 39,442.00 \$ here. Total Nonpriority. Add lines 6f through 6i. 6j. 39,442.00

Official Form 106 E/F Schedule E/F: Creditors Who Have Unsecured Claims

| | | 17/7/11/11/ | 111111111111111111111111111111111111111 | |
|---------------------|--------------------------|-------------------|---|--|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Susan J. Calandr | a | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | |
| | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | r company with Name, Number | h whom you have the er, Street, City, State and ZIP C | contract or lease | State what the contract or lease is for |
|-----|-----------|--------------------------------|---|-------------------|---|
| 2.1 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.2 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.3 | • | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.4 | • | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.5 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| | | | | | |

| | | Docume | <u>nt Page 27 (</u> | ot 49 | |
|--------------------------------|---|---|---|---|--|
| Fill in thi | is information to identify you | r case: | | | |
| Debtor 1 | Sugan I Caland | ro | | | |
| Deptor i | Susan J. Caland First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, f | iling) First Name | Middle Name | Last Name | | |
| United St | tates Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| | | | | _ | |
| Case nur (if known) | mber | | | | ☐ Check if this is an |
| (ii kilowii) | | | | | ☐ Check if this is an amended filing |
| | | | | | ae. aca ig |
| Officia | al Form 106H | | | | |
| Scha | dule H: Your Cod | lahtars | | | 12/15 |
| SCITE | dule II. Toul Cot | JEDIOI 3 | | | 12/15 |
| our nam | and number the entries in the eard case number (if knowr o you have any codebtors? (I | n). Answer every question | | | p of any Additional Pages, write |
| | by our nationally obacontol of the | i you are illing a joint oace, | do not hat chilor apadat | do a obdebion. | |
| ■ No | | | | | |
| Arizo No Ye 3. In Co in lin | ne 2 again as a codebtor only | a, Nevada, New Mexico, Pu ouse, or legal equivalent live otors. Do not include your if that person is a guaran | erto Rico, Texas, Wash with you at the time? spouse as a codebto tor or cosigner. Make | nington, and Wiśconsin.) r if your spouse is filin sure you have listed tl | |
| | Column 2. | arr orni 100E/1 /, or oched | | oog, ose schedule b, | Schedule Lift, of Schedule 9 to fill |
| | Column 1: Your codebtor Name, Number, Street, City, State and | ZIP Code | | Column 2: The cre Check all schedule | editor to whom you owe the debt es that apply: |
| 3.1 | | | | □ Sahadula D. lin | |
| 3.1 | Name | | | | |
| | | | | ☐ Schedule G, lin | |
| | | | | — Ochcadic O, iiii | |
| | Number Street City | State | ZIP Code | | |
| | Oity | Claic | Zii Oode | | |
| | | | | Под не с п | |
| 3.2 | Name | | | Schedule D, lin | |
| | Hamb | | | ☐ Schedule E/F, I | |
| | | | | ☐ Schedule G, lin | e |
| | Number Street | _ | | | |
| | City | State | ZIP Code | | |

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| Fill | in this information to identify your c | ase: | | | | | | | | |
|--------------------|--|-------------------------------|--|----------------------|----------------|-------------------------------|----------------------|--|---------------------|------------------------------|
| Del | Susan J. Ca | landra | | | _ | | | | | |
| | otor 2 puse, if filing) | | | | _ | | | | | |
| Uni | ted States Bankruptcy Court for the | : NORTHERN DISTRIC | CT OF ILLINOIS | | _ | | | | | |
| O Se | fficial Form 1061 chedule I: Your Inc | | pple are filing togethe | er (Debto | or 1 | ☐ An☐ A s 13 | income a | d filing ent showin as of the fo | ollowing | 12/1 |
| sup spo atta | plying correct information. If you use. If you are separated and you ch a separate sheet to this form. t 1: Describe Employment | are married and not filing wi | ng jointly, and your s ith you, do not includ | pouse i le inforr | s liv natio | ing with y on about y | ou, incli our spo | ude inforr ouse. If m | nation a | about your ace is needed, |
| 1. | Fill in your employment information. | | Debtor 1 | | | Debtor 2 or non-filing spouse | | | | |
| | If you have more than one job, attach a separate page with information about additional | Employment status | ■ Employed □ Not employed | | | | □ Emplo | - | | |
| | employers. | Occupation | Transcriber | | | | | | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | Transcription Te | chnolo | gy | | | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | 46 North Broad I Freedom, NH 03 | • | ad | | | | | |
| | | How long employed to | here? 4 Month | ıs | | | _ | | | |
| Pai | Give Details About Mo | nthly Income | | | | | | | | |
| | mate monthly income as of the duse unless you are separated. | ate you file this form. If | you have nothing to re | port for | any l | line, write | \$0 in the | space. In | clude yo | our non-filing |
| | u or your non-filing spouse have me e space, attach a separate sheet to | | ombine the information | for all e | mplo | oyers for th | nat perso | n on the li | nes bel | ow. If you need |
| | | | | | | For Debt | or 1 | | btor 2 c ing spo | |
| 2. | List monthly gross wages, sala deductions). If not paid monthly, | | | 2. | \$ | 1,8 | 377.62 | \$ | | N/A |
| 3. | Estimate and list monthly over | time pay. | | 3. | +\$ | | 0.00 | +\$ | | N/A |

Calculate gross Income. Add line 2 + line 3.

\$ 1,877.62

N/A

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| Debt | tor 1 | Susan J. Calandra | - | (| Case | number (if kn | own) | | | | |
|------|--------------------|--|-----------|----------------|-------------|---|------|----------|---------------------|-------------|---|
| | | | | | For | Debtor 1 | | | Debtor -filing s | | |
| | Cop | by line 4 here | 4. | | \$_ | 1,877 | .62 | \$ | | N/A | <u>\</u> |
| 5. | List | all payroll deductions: | | | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a | ı. | \$ | 422 | .54 | \$ | | N/A | \ |
| | 5b. | Mandatory contributions for retirement plans | 5b | | \$_ | | .00 | \$ | | N/A | |
| | 5c. | Voluntary contributions for retirement plans | 5c | : . | \$ | | .00 | \$ | | N/A | _ |
| | 5d. | Required repayments of retirement fund loans | 5d | i. | \$ | 0 | .00 | \$ | | N/A | <u></u> |
| | 5e. | Insurance | 5e |) . | \$ | 0 | .00 | \$ | | N/A | <u> </u> |
| | 5f. | Domestic support obligations | 5f. | | \$_ | | .00 | \$ | | N/A | _ |
| | 5g. | Union dues | 5g | | \$_ | | .00 | \$ | | N/A | |
| | 5h. | Other deductions. Specify: | _ 5h | 1.+ | \$_ | 0 | .00 | + \$ | | N/A | <u>\</u> |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | | \$_ | 422 | .54 | \$ | | N/A | <u>\</u> |
| 7. | Cal | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | | \$_ | 1,455 | .08 | \$ | | N/A | <u>\</u> |
| 8. | List 8a. | t all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a | . | \$ | • | .00 | \$ | | N/A | |
| | 8b. | Interest and dividends | 8b | | \$ - | | .00 | \$ | | N/A | |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | | | \$_ \$ | | .00 | \$ | | N/A | _ |
| | 8d. | | 8d | | \$ - | | .00 | *— | | N/A | _ |
| | 8e. | Social Security | 8e | | \$_ | 1,425 | | \$_ | | N/A | _ |
| | 8f. 8g. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income | 8f. 8g | | \$_ \$ | | .00 | \$ \$ | | N/A N/A | _ |
| | 8h. | Other monthly income. Specify: | 8h | | \$ - | | | + \$- | | N/A | _ |
| | 011. | | | | <u> </u> | | .00 | · — | | 14/ | <u>`</u> |
| 9. | Add | d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | <u> </u> | 1,425 | .00 | \$ | | N/ | Ά. |
| 10. | Cal | culate monthly income. Add line 7 + line 9. | 10. | \$ | | 2,880.08 | + \$ | | N/A | = \$ | 2,880.08 |
| | | I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | | ·- | | _,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | Ľ | | | | _,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| 11. | Incl othe Do | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not accify: | depe | | | • | | • | | ∍ J. +\$ | 0.00 |
| 12. | | If the amount in the last column of line 10 to the amount in line 11. The restet that amount on the Summary of Schedules and Statistical Summary of Certaillies | | | | | | | 12. | \$ | 2,880.08 |
| 13. | Do | you expect an increase or decrease within the year after you file this form | ? | | | | | | ' | Comb | ined Ily income |
| | | No. | | | | | | | | | |

Official Form 106I Schedule I: Your Income page 2

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| Fill | in this information to identify your case: | | 1 | | |
|-------------|---|--|--------------|-------------------|-------------------------------|
| Deb | otor 1 Susan J. Calandra | | Ched | ck if this is: | |
| | otor 2 | | _ | | wing postpetition chapter |
| (Spc | ouse, if filing) | | | 13 expenses as of | the following date: |
| Unite | ted States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLII | NOIS | | MM / DD / YYYY | |
| | se number | | | | |
| | fficial Form 106J | | | | |
| | chedule J: Your Expenses | CU ((t | | -11 | 12/1 |
| info | as complete and accurate as possible. If two married people a ormation. If more space is needed, attach another sheet to this mber (if known). Answer every question. | | | | |
| Part | t 1: Describe Your Household Is this a joint case? | | | | |
| 1. | ■ No. Go to line 2. □ Yes. Does Debtor 2 live in a separate household? | | | | |
| | ☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, Expense | es for Separate House | ehold of Deb | tor 2. | |
| 2. | Do you have dependents? ■ No | | | | |
| | Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent | Dependent's relat Debtor 1 or Debto | | Dependent's age | Does dependent live with you? |
| | Do not state the | | | | □ No |
| | dependents names. | | | | □ Yes □ No |
| | | | | | ☐ Yes |
| | | | | | □ No |
| | | | | | ☐ Yes |
| | | | | | □ No |
| 3. | Do your expenses include ■ No. | | | | ☐ Yes |
| Э. | expenses of people other than yourself and your dependents? | | | | |
| Esti exp | t 2: Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless penses as of a date after the bankruptcy is filed. If this is a supplicable date. | | | | |
| the | lude expenses paid for with non-cash government assistance value of such assistance and have included it on <i>Schedule I:</i> ficial Form 106I.) | | | Your exp | enses |
| 4. | The rental or home ownership expenses for your residence. payments and any rent for the ground or lot. | Include first mortgag | e 4. \$ | 3 | 1,377.00 |
| | If not included in line 4: | | | | |
| | 4a. Real estate taxes | | 4a. \$ | ; | 0.00 |
| | 4b. Property, homeowner's, or renter's insurance | | 4b. \$ | | 0.00 |
| | 4c. Home maintenance, repair, and upkeep expenses | | 4c. \$ | | 30.00 |
| _ | 4d. Homeowner's association or condominium dues | and an extende | 4d. \$ | | 198.74 |
| 5. | Additional mortgage payments for your residence, such as h | ome equity loans | 5. \$ |) | 0.00 |

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| btor 1 | Susan J. Calandra | Case num | ber (if known) | |
|------------------|---|---------------|----------------|----------------------------|
| Utiliti | es: | | | |
| 6a. | Electricity, heat, natural gas | 6a. | \$ | 120.00 |
| 6b. | Water, sewer, garbage collection | 6b. | \$ | 34.00 |
| 6c. | Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$ | 90.00 |
| 6d. | Other. Specify: Internet | 6d. | | 50.00 |
| | Cable | | \$ | 112.00 |
| Food | and housekeeping supplies | | * | |
| | care and children's education costs | | | 400.00 |
| | | 8. | \$ | 0.00 |
| | ing, laundry, and dry cleaning | 9. | | 16.00 |
| | onal care products and services | 10. | * | 50.00 |
| | cal and dental expenses | 11. | \$ | 50.00 |
| | sportation. Include gas, maintenance, bus or train fare. | 12. | ¢ | 50.00 |
| | ot include car payments. | | | |
| | tainment, clubs, recreation, newspapers, magazines, and books | 13. | | 0.00 |
| | table contributions and religious donations | 14. | \$ | 0.00 |
| Insur | | | | |
| | of include insurance deducted from your pay or included in lines 4 or 20. | | • | _ |
| | Life insurance | 15a. | · | 0.00 |
| | Health insurance | 15b. | | 160.00 |
| 15c. | Vehicle insurance | 15c. | \$ | 54.00 |
| 15d. | Other insurance. Specify: | 15d. | \$ | 0.00 |
| | s. Do not include taxes deducted from your pay or included in lines 4 or 20. | | • | _ |
| Speci | • | 16. | \$ | 0.00 |
| | Ilment or lease payments: | | • | |
| | Car payments for Vehicle 1 | 17a. | · | 0.00 |
| | Car payments for Vehicle 2 | 17b. | \$ | 0.00 |
| 17c. | Other. Specify: Best Buy | 17c. | \$ | 50.00 |
| 17d. | Other. Specify: | 17d. | \$ | 0.00 |
| Your | payments of alimony, maintenance, and support that you did not report | as | | |
| | cted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106 | I). 18. | | 0.00 |
| Othe | payments you make to support others who do not live with you. | | \$ | 0.00 |
| Speci | fy: | 19. | | |
| Othe | real property expenses not included in lines 4 or 5 of this form or on Sc | chedule I: Yo | our Income. | |
| 20a. | Mortgages on other property | 20a. | \$ | 0.00 |
| 20b. | Real estate taxes | 20b. | \$ | 0.00 |
| 20c. | Property, homeowner's, or renter's insurance | 20c. | \$ | 0.00 |
| | Maintenance, repair, and upkeep expenses | 20d. | \$ | 0.00 |
| | Homeowner's association or condominium dues | 20e. | · | 0.00 |
| | : Specify: | 21. | | 0.00 |
| | ' | | - Ψ | 0.00 |
| Calcu | ılate your monthly expenses | | | |
| 22a. / | Add lines 4 through 21. | | \$ | 2,841.74 |
| 22b. (| Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | 2 | \$ | |
| | Add line 22a and 22b. The result is your monthly expenses. | | \$ | 2,841.74 |
| | ad into 22d dila 22b. The legal is your monthly expenses. | | | 2,041./4 |
| | ılate your monthly net income. | | | |
| 23a. | Copy line 12 (your combined monthly income) from Schedule I. | 23a. | \$ | 2,880.08 |
| 23b. | Copy your monthly expenses from line 22c above. | 23b. | -\$ | 2,841.74 |
| | • • | | | _,, |
| 23c. | Subtract your monthly expenses from your monthly income. | | | 20.04 |
| | The result is your monthly net income. | 23c. | \$ | 38.34 |
| For ex modifi | ou expect an increase or decrease in your expenses within the year after ample, do you expect to finish paying for your car loan within the year or do you expect your to the terms of your mortgage? | | | ease or decrease because (|
| ■ No |). | | | |
| □Y€ | s. Explain here: | · | | |
| _ | - · | | | |

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| Fill in this infor | mation to identify your | case: | | | |
|-------------------------------------|--|--|----------------------------|----------------------------|--|
| Debtor 1 | Susan J. Calandr | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States B | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case number | | | | | |
| (if known) | | | | | Check if this is an amended filing |
| Official For | | ın Individual | Debtor's S | Schedules | 12/15 |
| Doorara | tion / toodic | ······································ | D D D D D D D D D D | 3011044100 | 12/15 |
| obtaining mone years, or both. 1 | | n connection with a ban | | | ment, concealing property, or 0, or imprisonment for up to 20 |
| Did you pa | ay or agree to pay some | one who is NOT an atto | rney to help you fill o | ut bankruptcy forms? | |
| ■ No | | | | | |
| ☐ Yes. | Name of person | | | | cruptcy Petition Preparer's Notice, and Signature (Official Form 119) |
| | alty of perjury, I declare re true and correct. | that I have read the sun | nmary and schedules | filed with this declaratio | , |
| tilat tiley al | e ii ue aliu correct. | | | | |
| | san J. Calandra | | X | | |
| | J. Calandra ure of Debtor 1 | | Signature | e of Debtor 2 | |

Date _____

Date April 5, 2016

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| -HI | in this inform | action to identify you | r 00001 | | | |
|---------------------|----------------------------|--|---|---|---|---|
| | | nation to identify you | | | | |
| De | btor 1 | Susan J. Caland | Middle Name | Last Name | | |
| | btor 2 buse if, filing) | First Name | Middle Name | Last Name | | |
| Uni | ited States Bar | nkruptcy Court for the: | NORTHERN DISTRICT (| OF ILLINOIS | | |
| | se number | | | | _ | Check if this is an mended filing |
| Sta Be a info | as complete a | of Financial | attach a separate sheet to | re filing together, both are | ankruptcy equally responsible for sup additional pages, write you | |
| | | | arital Status and Where You | Lived Before | | |
| 1. | What is your | current marital statu | ıs? | | | |
| | ☐ Married ■ Not mar | ried | | | | |
| 2. | During the la | ıst 3 years, have you | lived anywhere other than | where you live now? | | |
| | ■ No □ Yes. List | t all of the places you l | ived in the last 3 years. Do no | ot include where you live now | : | |
| | Debtor 1 Pri | or Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ad | dress: | Dates Debtor 2 lived there |
| 3. stat | | | | | ity property state or territor co, Texas, Washington and V | |
| | ■ No □ Yes. Ma | ke sure you fill out <i>Scl</i> | nedule H: Your Codebtors (O | ficial Form 106H). | | |
| Pa | rt 2 Explain | n the Sources of You | r Income | | | |
| 4. | Fill in the tota | I amount of income yo | nployment or from operatin u received from all jobs and a have income that you receiv | all businesses, including part- | | ndar years? |
| | □ No ■ Yes. Fill | in the details. | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | | of current year until d for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$4,054.00 | ☐ Wages, commissions, bonuses, tips | |
| | | | ☐ Operating a business | | ☐ Operating a business | |

Official Form 107

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Debtor 1 Susan J. Calandra

| | Debtor 1 | | Debtor 2 | | | |
|--|--|---|--|---|--|--|
| | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | | |
| For last calendar year: (January 1 to December 31, 2015) | ■ Wages, commissions, bonuses, tips | \$44,539.00 | ☐ Wages, commissions, bonuses, tips | | | |
| | ☐ Operating a business | | ☐ Operating a business | | | |
| For the calendar year before that: (January 1 to December 31, 2014) | ■ Wages, commissions, bonuses, tips | \$58,003.00 | ☐ Wages, commissions, bonuses, tips | | | |
| | ☐ Operating a business | | ☐ Operating a business | | | |
| | | | | | | |

Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

No

Yes. Fill in the details.

| | Debtor 1 | | Debtor 2 | |
|---|--------------------------------------|--|--------------------------------------|---|
| | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of income Describe below. | Gross income (before deductions and exclusions) |
| From January 1 of current year until the date you filed for bankruptcy: | Social Security | \$4,365.00 | | |
| For last calendar year: (January 1 to December 31, 2015) | Social Security | \$4,365.00 | | |
| For the calendar year before that: (January 1 to December 31, 2014) | IRA Withdrawal - Cashed Out | \$3,000.00 | | |
| | Social Security | \$1,088.00 | | |
| | | | | |

List Certain Payments You Made Before You Filed for Bankruptcy

| 8 | Are either Debtor 1 | 's or Dobtor ' | 2's dabte | nrimarily | concumer | dobte |
|----|---------------------|----------------|-----------|-----------|----------|--------|
| ο. | Are either Debtor i | S or Deptor A | z s debts | primarily | consumer | debts: |

Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?

 \square No. Go to line 7.

List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

□ No.

Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

^{*} Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

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Case number (if known) Debtor 1 Susan J. Calandra

| | Creditor's Name and Address | Dates of payment | Total amount | Amount you | Was this na | yment for | | | | | |
|--|--|-------------------------|--|----------------------|---|--------------------------|--|--|--|--|--|
| | Orealtor 3 Name and Address | Dates of payment | paid | still owe | was tills pe | yment for | | | | | |
| | Ocwen Loan Servicing 1611 Worthington Rd., Ste. 100 West Palm Beach, FL 33409 | 2/16, 3/16 + 4/16 | \$4,131.00 | \$131,989.00 | ■ Mortgage □ Car □ Credit Ca □ Loan Rep □ Suppliers □ Other | ord Dayment | | | | | |
| 7. | Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. | | | | | | | | | | |
| | ■ No | | | | | | | | | | |
| | Yes. List all payments to an insider. Insider's Name and Address | Dates of payment | Total amount | Amount you | Reason for | this payment | | | | | |
| 0 | Within A years before you filed for borders at | | paid | still owe | | sht that havetited an | | | | | |
| 8. | Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. | | | | | | | | | | |
| | include payments on debts guaranteed or cos | ngiled by all illoider. | | | | | | | | | |
| | No No | | | | | | | | | | |
| | Yes. List all payments to an insider | | | | | | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for Include cred | this payment itor's name | | | | | |
| Par | 4: Identify Legal Actions, Repossession | ns, and Foreclosures | | | | | | | | | |
| Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No | | | | | | | | | | | |
| | Yes. Fill in the details. | National of the same | 0 | | 01-1 | | | | | | |
| | Case title Case number | Nature of the case | Court or agency | | Status of th | e case | | | | | |
| 10. | Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. | | | | | | | | | | |
| | No. Go to line 11.Yes. Fill in the information below. | | | | | | | | | | |
| | Creditor Name and Address | Describe the Property | | Date | | Value of the | | | | | |
| | | Explain what happened | d | | | property | | | | | |
| 11. | Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. | | | | | | | | | | |
| | Creditor Name and Address | Describe the action the | creditor took | Date | action was | Amount | | | | | |
| | C. Cantor Hamo and Flame 1999 | 2000.130 the detion the | . J. | taken | | Amount | | | | | |
| 12. | Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? | | | | | | | | | | |
| | ■ No | | | | | | | | | | |
| | ☐ Yes | | | | | | | | | | |

Page 36 of 49 Case number (if known) Document Debtor 1 Susan J. Calandra Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe any insurance coverage for the loss Describe the property you lost and Date of your Value of property how the loss occurred lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. ☐ No Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment Amount of Address transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You \$1,400.00 Law Office of Gregory J. Martucci Attorney Fees + Costs 9/2015 -203 E. Irving Park Road 3/2016 Roselle, IL 60172 greg@martuccilaw.com

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

No

Yes Fill in the details

Person Who Was Paid Description and value of any property Date payment Amount of **Address** transferred or transfer was payment made

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Case number (if known) Document

Debtor 1 Susan J. Calandra

| 18. | Incluinclu | Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. | | | | | | | | |
|---|---|--|---------|--|-----------------|----------|---|---|-----------------------|-------------------------------|
| | Per | rson Who Received Transfer dress | | Description and v | | | payme | ibe any property or ents received or debts n exchange | | Date transfer was made |
| Person's relationship to you | | | | | | | | | | |
| 19. | | Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No | | | | | | | | |
| | | Yes. Fill in the details. | | | | | | | | |
| | Name of trust | | | Description and v | alue of the pro | operty | y trans | ferred | | Date Transfer was made |
| Par | t 8: | List of Certain Financial Accounts, In | strui | ments, Safe Deposi | t Boxes, and S | Storag | e Unit | s | | |
| 20 | 18/:41 | | | ore only financial as | | | nto bo | ld in varie name, as far | | r hanafit alasad |
| 20. | solo | nin 1 year before you filed for bankrupto I, moved, or transferred? | • | • | | | | • | • | , |
| | Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. | | | | | | | | | |
| | | No Yes. Fill in the details. | | | | | | | | |
| | | me of Financial Institution and | Las | st 4 digits of | Type of acco | ount c | or | Date account was | | Last balance |
| | Address (Number, Street, City, State and ZIP Code) | | | account number instrument | | | closed, sold, moved, or transferred | | | before closing or transfer |
| 21. Do you now have, or did you have within 1 year before you f cash, or other valuables? | | | | before you filed for | bankruptcy, a | any sa | afe dep | oosit box or other depo | osito | ry for securities, |
| | | No | | | | | | | | |
| | | Yes. Fill in the details. | | | | | | | | |
| | | me of Financial Institution dress (Number, Street, City, State and ZIP Code) | | Who else had acc Address (Number, S State and ZIP Code) | | Des | scribe | the contents | | Do you still have it? |
| 22. | Hav | e you stored property in a storage unit | or pl | ace other than you | home within | 1 yea | r befor | e you filed for bankruր | otcy? | , |
| | | No | | | | | | | | |
| | | Yes. Fill in the details. | | | | | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | | | Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) | | scribe 1 | the contents | | Do you still have it? | |
| Por | ٠.٠. | Identify Property You Hold or Centre | l for | Samaona Elsa | | | | | | |
| Par | l 9. | Identify Property You Hold or Control | 1 101 . | Someone Lise | | | | | | |
| 23. | Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. | | | | | | | | | |
| | | No | | | | | | | | |
| | | Yes. Fill in the details. | | | | | | | | |
| | | rner's Name dress (Number, Street, City, State and ZIP Code) | | Where is the prop (Number, Street, City, S Code) | | Des | scribe | the property | | Value |
| Par | t 10: | Give Details About Environmental Inf | iorma | ation | | | | | | |

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 5 Case 16-11759 Doc 1 Filed 04/06/16 Entered 04/06/16 10:46:43 Desc Main Page 38 of 49
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Debtor 1 Susan J. Calandra

> toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

| | hazardous material, pollutant, contaminant, or similar term. | | | | | | | |
|---|--|---|--|----------------|--|--------------------|--|--|
| Rep | Report all notices, releases, and proceedings that you know about, regardless of when they occurred. | | | | | | | |
| 24. | Has | as any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? | | | | | | |
| | | No | | | | | | |
| | | Yes. Fill in the details. | | | | | | |
| | | me of site dress (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | i | Environmental law, if you know it | Date of notice | | |
| 25. | Hav | re you notified any governmental unit of | any release of hazardous material? | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code) ZIP Code) | | Environmental law, if you know it | Date of notice | | | | |
| 26. | Hav | Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | |
| | | se Title se Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nat | ture of the case | Status of the case | | |
| Par | t 11: | Give Details About Your Business or | Connections to Any Business | | | | | |
| 27. | | _ | | v of | the following connections to any | husiness? | | |
| 21. | Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time | | | | | | | |
| | ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) | | | | | | | |
| | ☐ A partner in a partnership | | | | | | | |
| | ☐ An officer, director, or managing executive of a corporation | | | | | | | |
| | | ☐ An owner of at least 5% of the voting | · | | | | | |
| | | No. None of the above applies. Go to F | | | | | | |
| | _ | Yes. Check all that apply above and fill | | . | | | | |
| | | siness Name | Describe the nature of the business | - | Employer Identification number | | | |
| | Address (Number, Street, City, State and ZIP Code) | | Name of accountant or bookkeeper | | Do not include Social Security number or ITIN. Dates business existed | | | |
| 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all fi institutions, creditors, or other parties. | | | | | de all financial | | | |
| | | No | | | | | | |
| | | Yes. Fill in the details below. | | | | | | |
| | Ad | me dress mber, Street, City, State and ZIP Code) | Date Issued | | | | | |
| | | | | | | | | |

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 6 Case 16-11759 Doc 1 Filed 04/06/16 Entered 04/06/16 10:46:43 Page 39 of 49
Case number (if known) Document

Debtor 1 Susan J. Calandra

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Susan J. Calandra Signature of Debtor 2

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

Date

■ No

Susan J. Calandra Signature of Debtor 1 Date April 5, 2016

☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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| Debtor 1 | Susan J. Calandra | | |
|---------------------------------|--|---|---|
| | First Name Middle Name | Last Name | |
| Debtor 2 (Spouse if, filing) | First Name Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: NORTHERN DIS | STRICT OF ILLINOIS | |
| | | | |
| Case number _ (if known) | | | ☐ Check if this is an amended filing |
| | | | _ |
| Official Fo | rm 100 | | |
| _ | | of local a Filim of the day Objection | = |
| Statemer | nt of intention for indi- | viduals Filing Under Chapte | 12/15 |
| lf vou are an indi | ividual filing under chapter 7, you must fi | ill out this form if: | |
| _ | e claims secured by your property, or | in out this form ii. | |
| _ | sed personal property and the lease has | not expired. | |
| You must file this | s form with the court within 30 days afte | r you file your bankruptcy petition or by the date set he time for cause. You must also send copies to the | |
| on the | | the time for cause. You must also send copies to the | creditors and lessors you list |
| If two married pe | eople are filing together in a joint case. b | oth are equally responsible for supplying correct info | ormation. Both debtors must |
| | nd date the form. | | |
| | | is needed, attach a separate sheet to this form. On th | e top of any additional pages, |
| write ye | our name and case number (if known). | | |
| Part 1: List Yo | our Creditors Who Have Secured Claims | | |
| 1 For any credite | ore that you listed in Part 1 of Schedule I | D: Creditors Who Have Claims Secured by Property (| Official Form 106D) fill in the |
| information be | elow. | , , , | , |
| Identity the cre | editor and the property that is collateral | What do you intend to do with the property that secures a debt? | Did you claim the property as exempt on Schedule C? |
| | | | |
| Creditor's B | Sest Buy | ☐ Surrender the property. | □ No |
| name: | | ☐ Retain the property and redeem it. | — 110 |
| Description of | Computer | Retain the property and enter into a | Yes |
| property | Computer | Reaffirmation Agreement. Retain the property and [explain]: | |
| securing debt: | | The retain the property and [explain]. | |
| | | | |
| Creditor's C | Cenlar | ☐ Surrender the property. | □No |
| name: | oemai | Retain the property and redeem it. | □ NO |
| December of | 500 Wasteriastan Circle Basella | Retain the property and enter into a | ■ Yes |
| Description of | 590 Westminster Circle Roselle, IL 60172 DuPage County | Reaffirmation Agreement. | |
| property securing debt: | | ☐ Retain the property and [explain]: | |
| | | | , |
| Craditaria | Weterland Williams T | | — |
| Creditor's W name: | Vaterberry Village Townhome | ☐ Surrender the property. ☐ Retain the property and redeem it. | □ No |
| | | Retain the property and redeem it. | Yes |
| Description of | 590 Westminster Circle Roselle, IL 60172 DuPage County | Reaffirmation Agreement. | |
| property | IL 00172 Durage County | ☐ Retain the property and [explain]: | |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

Fill in this information to identify your case:

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| Case number (if known) |
|--|
| |
| |
| ory Contracts and Unexpired Leases (Official Form 106G), fill es that are still in effect; the lease period has not yet ended. sume it. 11 U.S.C. § 365(p)(2). |
| Will the lease be assumed? |
| □ No |
| ☐ Yes |
| |
| roperty of my estate that secures a debt and any personal |
| |
| ure of Debtor 2 |
| |
| |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-11759 Doc 1 Filed 04/06/16 Entered 04/06/16 10:46:43 Desc Main Document Page 46 of 49

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

| In re | Susan J. Calandra | | Case No | | |
|-------------|--|---|--|--|--------------|
| | | Debtor(s) | Chapter | 7 | |
| | DISCLOSURE OF COMPENS | SATION OF ATTO | RNEY FOR I | DEBTOR(S) | |
| co | ursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b) impensation paid to me within one year before the filing a rendered on behalf of the debtor(s) in contemplation of the debtor (s). | of the petition in bankruptcy | , or agreed to be pa | id to me, for services rea | |
| | For legal services, I have agreed to accept | | \$ | 1,400.00 | |
| | Prior to the filing of this statement I have received | | \$ | 1,400.00 | |
| | Balance Due | | \$ | 0.00 | |
| 2. T | he source of the compensation paid to me was: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 3. T | he source of compensation to be paid to me is: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 4. I | I have not agreed to share the above-disclosed compen | sation with any other person | n unless they are me | mbers and associates of | my law firm. |
| 0 | I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name | | | | aw firm. A |
| 5. In | n return for the above-disclosed fee, I have agreed to rend | ler legal service for all aspec | cts of the bankruptcy | case, including: | |
| b. c. | Analysis of the debtor's financial situation, and rendering Preparation and filing of any petition, schedules, statem Representation of the debtor at the meeting of creditors [Other provisions as needed] Negotiations with secured creditors to recommend reaffirmation agreements and applications 522(f)(2)(A) for avoidance of liens on house | nent of affairs and plan which and confirmation hearing, a luce to market value; ex as needed; preparation | th may be required; and any adjourned h cemption plannin | earings thereof; g; preparation and fi | iling of |
| 6. B | y agreement with the debtor(s), the above-disclosed fee d Representation of the debtors in any discl any other adversary proceeding. | | | ces, relief from stay | actions or |
| | | CERTIFICATION | | | |
| | certify that the foregoing is a complete statement of any a nkruptcy proceeding. | greement or arrangement for | or payment to me for | representation of the de | ebtor(s) in |
| Ap | ril 5, 2016 | /s/ Gregory J. M | artucci | | |
| Date | | Gregory J. Marti Signature of Attorn | | | |
| | | Law Office of Gregory J. Martucci, P.C. | | | |
| | | 203 E. Irving Par | k Rd. | | |
| | | Roselle, IL 6017 (630) 980-8333 | ₂ Fax: (630) 980-84 | 04 | |
| | | greg@martuccil | | | |
| | | Name of law firm | | | |

United States Bankruptcy Court Northern District of Illinois

| In re | Susan J. Calandra | | Case No. | | | | |
|-------|--|---|---------------------------------|--------------|--|--|--|
| | | Debtor(s) | Chapter 7 | | | | |
| | VERIFICATION OF CREDITOR MATRIX | | | | | | |
| | | Number of | Creditors: | 12 | | | |
| | The above-named Debtor(s) (our) knowledge. | hereby verifies that the list of credi | tors is true and correct to the | e best of my | | | |
| Date: | April 5, 2016 | /s/ Susan J. Calandra Susan J. Calandra Signature of Debtor | | | | | |

Best Buy P.O. Box 688911 Des Moines, IA 50368

Capital One Bank P.O. Box 30281 Salt Lake City, UT 84130

Care Credit P.O. Box 965036 Orlando, FL 32896

Cenlar P.O. Box 77404 Ewing, NJ 08628

Chase Bank P.O. Box 15298 Wilmington, DE 19850

Comenity Bank - Avenue P.O. Box 659584 San Antonio, TX 78265

EIS P.O. Box 1730 Renoldsburg, OH 43062

JCPenneys P.O. Box 45270 Salt Lake City, UT 84145

Northland Group, Inc. P.O. Box 390846 Minneapolis, MN 55439

Sears P.O. Box 818017 Cleveland, OH 44181

State Collection Service, Inc. 2509 S. Stoughton Road Madison, WI 53716

US Bank P.O. Box 790401 Saint Louis, MO 63179